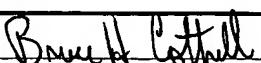


UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.: S-100,565
		First Inventor or Application Identifier: James H. Werner
		Title: HIGH THROUGHPUT SCREENING USING FLUOROPHORE LABELED LIPID MEMBRANES AND FLUORESCENCE CORRELATION SPECTROSCOPY
		Express Mail Label No.: ER311841455US
APPLICATION ELEMENTS		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application PO Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i>		6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>		7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ol style="list-style-type: none"> <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Specification Sequence Listing on: <ol style="list-style-type: none"> <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper <input type="checkbox"/> Statement verifying identity of above copies
		ACCOMPANYING APPLICATION PARTS
3. <input checked="" type="checkbox"/> Specification [Total Pages: 16] <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Descriptive title of the Invention <input type="checkbox"/> Cross References to Related Applications <input checked="" type="checkbox"/> Statement Regarding Fed sponsored R&D <input type="checkbox"/> Reference to sequence listing, a table or a computer program listing appendix <input checked="" type="checkbox"/> Background of the Invention <input checked="" type="checkbox"/> Brief Description of the Drawings (if filed) <input checked="" type="checkbox"/> Detailed Description <input checked="" type="checkbox"/> Claim(s) <input checked="" type="checkbox"/> Abstract of the Disclosure 		8. <input type="checkbox"/> Assignment Papers (cover sheet & documentation)
4. <input checked="" type="checkbox"/> Drawings(s) (35 U.S.C.113) [Total Sheets: 6] <ul style="list-style-type: none"> <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal 		9. <input type="checkbox"/> 37 C.F.R.§3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>
5. <input type="checkbox"/> Declaration & Power of Attorney <i>[Total Pages:]</i> <ol style="list-style-type: none"> <input type="checkbox"/> Newly executed (original or copy) <input type="checkbox"/> Copy from a prior application (37 C.F.R.§.63(d)) <i>(for continuation/divisional with Box 16 completed)</i> <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b).</i> 		10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
		11. <input type="checkbox"/> Preliminary Amendment
		12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(should be specifically itemized)</i>
		13. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
		14. <input type="checkbox"/> Nonpublication Request and Certification Under 35 U.S.C. 122(b)(2)(b)(i)
		15. <input type="checkbox"/> Other:
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:		
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application S.N. .		
Prior application information:		Examiner: Group/Art Unit:
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
16. CORRESPONDENCE ADDRESS		
<input checked="" type="checkbox"/> Customer Number 35068		OR <input type="checkbox"/> Correspondence Address Below
35068		
Name: Bruce H. Cottrell Address: Los Alamos National Laboratory, LC/IP, MS A187 City: Los Alamos State: New Mexico Zip Code: 87545 Country: United States Telephone: (505) 667-9168 Fax: (505) 665-4424		
Name: Bruce H. Cottrell		Registration No.: 30,620
Signature: 		Date: 03/01/04

FEE TRANSMITTAL

For FY 2004

*Patent fees are subject to annual revision
(submit an original and a duplicate for fee processing)*

Complete if Known	
Application Number:	
Filing Date:	
First Named Inventor:	James H. Werner
Examiner Name:	
Group/Art Unit:	
Attorney Docket No.:	S-100,565

METHOD OF PAYMENT

- The commissioner is hereby authorized to charge indicated fees and credit any over payments to:
Deposit Account Number: 12-2150
Deposit Account Name: Los Alamos National Laboratory
- Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17
- Applicant claims small entity status.
See 37 CFR 1.27

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$770	\$385	Utility filing fee	\$385.00
\$770	\$385	Reissue filing fee	
\$160	\$80	Provisional filing fee	

SUBTOTAL (1) \$385.00

2. EXTRA CLAIM FEES

		Extra Claims	Fee from Fee Paid Below	
Total Claims	15	20** =	0	X 0 = 0
Independent	3	3 ** =	0	X 0 = 0
Claims				
Multiple Dependent				=

*** or number previously paid, if greater; For Reissues, see below*

Large Entity Fee	Small Entity Fee	Fee Description
\$18	\$9	Claims in excess of 20
\$86	\$43	Independent claims in excess of 3
\$290	\$145	Multiple dependent claim, if not paid.
\$86	\$43	** Reissue independent claims over original patent
\$18	\$9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$0

3. ADDITIONAL FEES

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$130	\$65	Surcharge – late filing fee or oath	
\$50	\$25	Surcharge – late provisional filing fee or cover sheet	
\$2,520	\$2,520	For filing a request for reexamination	
\$110	\$55	Extension for reply within first month	
\$420	\$210	Extension for reply within second month	
\$950	\$475	Extension for reply within third month	
\$1,480	\$740	Extension for reply within fourth month	
\$2,010	\$1,005	Extension for reply within fifth month	
\$330	\$165	Notice of Appeal	
\$330	\$165	Filing a brief in support of an appeal	
\$290	\$145	Request for oral hearing	
\$110	\$55	Petition to revive – unavoidable	
\$110	\$55	Terminal Disclaimer	
\$1,330	\$665	Petition to revive – unintentional	
\$130	\$130	Petitions to the Commissioner	
\$ 50	\$50	Petitions related to provisional applications	
\$ 180	\$180	Submission of Information Disclosure Statement	
\$770	\$385	Filing a submission after final rejection (37 CFR 1.129 (a))	
\$770	\$385	For each additional invention to be examined (37 CFR 1.129(b))	
\$100	\$100	Certificate of Correction	
\$300	\$300	Publication fee for early, voluntary, or normal publication	
\$770	\$385	Request for Continued Examination (RCE)	
Other fee (specify) _____			
SUBTOTAL (3)			\$0
Reduced by Basic Filing Fee Paid			
SUBTOTAL FROM 1			\$385
SUBTOTAL FROM 2			\$0
SUBTOTAL FROM 3			\$0
TOTAL AMOUNT OF PAYMENT			\$385

SUBMITTED BY

Complete (if applicable)

Printed Name:	Bruce H. Cottrell	Reg. No.	30,620
Signature:	<i>Bruce H. Cottrell</i>	Date: 03/01/04	Telephone: (505) 667-9168